



COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

(Indicates Reference to PCT International Application)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

"A METHOD OF TREATMENT AND AN ANIMAL MODEL USEFUL FOR SAME"

the specification of which (check only one item below):

is attached hereto.
 was filed as United States application

Serial No. _____

on _____

and was amended _____

on _____ (if applicable).

was filed as PCT international application

Number PCT/AU98/00764
16 September, 1998

on _____

and was amended under PCT Article 19

on _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

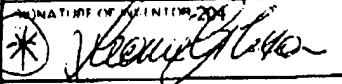
I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed:

PRIOR FOREIGN/PCT APPLICATION(S) AND ANY PRIORITY CLAIMS UNDER 35 U.S.C. 119:

COUNTRY (PCT AND/OR PCT)	APPLICATION NUMBER	DATE OF FILING (MM, MONTH, YEAR)	PRIORITY CLAIMED UNDER 35 USC 119
AUSTRALIA	PO 9228	16 September, 1997	<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO
			<input type="checkbox"/> YES <input type="checkbox"/> NO

204	FAMILY NAME GIBSON	FIRST GIVEN NAME Lorraine	SECOND GIVEN NAME
	RESIDENCE & COUNTRYSHIP Moonee Ponds	STATE OR FOREIGN COUNTRY Victoria, Australia	COUNTRY OF CITIZENSHIP Australia
	POST OFFICE ADDRESS 13 Park Street,	CITY Moonee Ponds, Victoria	STATE & ZIP CODE/COUNTRY 3039, Australia
205	FAMILY NAME KOENTGEN	FIRST GIVEN NAME Frank	SECOND GIVEN NAME
	RESIDENCE & COUNTRYSHIP Park Orchards	STATE OR FOREIGN COUNTRY Victoria, Australia	COUNTRY OF CITIZENSHIP Germany
	POST OFFICE ADDRESS 5 Timberglades,	CITY Park Orchards, Victoria	STATE & ZIP CODE/COUNTRY 3114, Australia
206	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & COUNTRYSHIP CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
207	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & COUNTRYSHIP CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
208	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & COUNTRYSHIP CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
209	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & COUNTRYSHIP CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 204 	SIGNATURE OF INVENTOR 205 X	SIGNATURE OF INVENTOR 206
DATE X 14th June, 2000	DATE X	DATE
SIGNATURE OF INVENTOR 207	SIGNATURE OF INVENTOR 208	SIGNATURE OF INVENTOR 209
DATE	DATE	DATE

15/06 00 10:51

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AIRC-CGF MELB.

004/009

61 3 9345 2616

Combined Declaration For Patent Application and Power of Attorney (Continued)

Inventor's Identification: 2.1 Inventor(s) Name _____

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is, are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that, those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112. I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

U.S. APPLICATIONS		STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
PCT/AU98/00764	16 September, 1998			

PCT APPLICATIONS DESIGNATING THE U.S.

PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. Stephen D. Murphy, Reg. No. 22,002; Leopold Presser, Reg. No. 19,827; William C. Roch, Reg. No. 24,972; Kenneth L. King, Reg. No. 24,223; Frank S. DIGIACO, Reg. No. 31,348; Paul J. Esatto, Jr., Reg. No. 30,749; John S. Seamus, Reg. No. 28,757; Mark J. Cohen, Reg. No. 32,211; Richard L. Catania, Reg. No. 32,608 and Donald T. Black, Reg. No. 27,999.

Send Correspondence to:	Scully, Scott, Murphy & Presser 400 Garden City Plaza Garden City, NY 11530	Direct Telephone Calls to: (Name and telephone number) Leopold Presser (516) 742-4343
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201	FULL NAME OF INVENTOR CORY	FAMILY NAME Suzanne	FIRST GIVEN NAME Suzanne	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY North Melbourne	STATE OR ZIP CODE/COUNTRY Victoria, Australia	COUNTRY OF CITIZENSHIP Australia	
POST OFFICE ADDRESS	57 BYRNEHAM Street	North Melbourne, Victoria	STATE & ZIP CODE/COUNTRY 3051, Australia	
202	FULL NAME OF INVENTOR ADAMS	FAMILY NAME Jerry	FIRST GIVEN NAME Jerry	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY North Melbourne	STATE OR ZIP CODE/COUNTRY Victoria, Australia	COUNTRY OF CITIZENSHIP Australia	
POST OFFICE ADDRESS	57 BYRNEHAM Street	North Melbourne, Victoria	STATE & ZIP CODE/COUNTRY 3051, Australia	
203	FULL NAME OF INVENTOR PRINT	FAMILY NAME Clint	FIRST GIVEN NAME Clint	SECOND GIVEN NAME
RESIDENCE & CITIZENSHIP	CITY North Melbourne	STATE OR ZIP CODE/COUNTRY Victoria, Australia	COUNTRY OF CITIZENSHIP New Zealand	
POST OFFICE ADDRESS	46 Erskin Street	North Melbourne, Victoria	STATE & ZIP CODE/COUNTRY 3051, Australia	

300
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 201 X Suzanne Cory	SIGNATURE OF INVENTOR 202 X Jerry M. Presser	SIGNATURE OF INVENTOR 203 (X) J. Print
DATE X	DATE X 14 June, 2000	DATE X 15 June 2000

[] Signature for fourth and subsequent joint inventors.
Number of pages added _____.

Form 13 - Fee Patent Application and Power of Attorney (Continued)

Combined Declaration Form - Item IV

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 17, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER
35 U.S.C. 120: _____

U.S. APPLICATIONS		STATUS (Check one)		
U.S. APPLICATION NUMBER	U.S. FILING DATE	PATENTED	PENDING	ABANDONED
PCT/AU98/00764	16 September, 1998			
PCT APPLICATIONS DESIGNATING THE U.S.				
PCT APPLICATION NO.	U.S. FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)		

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: Stephen D. Murphy, Reg. No. 22,002; Leopold Presser, Reg. No. 19,827; William C. Roch, Reg. No. 24,972; Kenneth L. King, Reg. No. 24,221; Frank S. DiGiglio, Reg. No. 31,346; Paul J. Esatto, Jr., Reg. No. 30,749; John S. Senany, Reg. No. 28,757; Mark J. Cohen, Reg. No. 32,211; Richard L. Catania, Reg. No. 32,508 and Donald T. Black, Reg. No. 27,993.

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Scully, Scott, Murphy & Presser
400 Garden City Plaza
Garden City, NY 11530

Direct Telephone Calls to:
(name and telephone number)

<u>Scully, Scott, Murphy & Presser</u> <u>400 Garden City Plaza</u> <u>Garden City, NY 11530</u>				<u>Leopold Presser</u> <u>(516) 742-4343</u>
201	FULL NAME OF INVENTOR <u>CORY</u>	FAMILY NAME <u>CORY</u>	FIRST GIVEN NAME <u>Suzanne</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP CITY <u>North Melbourne</u>	STATE OR OTHER COUNTRY <u>AUSTRALIA</u>	VICTORIA, AUSTRALIA	COUNTRY OF CITIZENSHIP <u>Australia</u>
202	POST OFFICE ADDRESS <u>37 Brougham Street</u>	POST OFFICE ADDRESS <u>37 Brougham Street</u>	POST OFFICE ADDRESS <u>North Melbourne, Victoria</u>	STATE & ZIP CODE/COUNTRY <u>3051, Australia</u>
	FULL NAME OF INVENTOR <u>ADAMS</u>	FAMILY NAME <u>ADAMS</u>	FIRST GIVEN NAME <u>Jerry</u>	SECOND GIVEN NAME
203	RESIDENCE & CITIZENSHIP CITY <u>North Melbourne</u>	STATE OR OTHER COUNTRY <u>AUSTRALIA</u>	VICTORIA, AUSTRALIA	COUNTRY OF CITIZENSHIP <u>Australia</u>
	POST OFFICE ADDRESS <u>37 Brougham Street</u>	POST OFFICE ADDRESS <u>37 Brougham Street</u>	POST OFFICE ADDRESS <u>North Melbourne, Victoria</u>	STATE & ZIP CODE/COUNTRY <u>3051, Australia</u>
FULL NAME OF INVENTOR <u>PRINZ</u>	FAMILY NAME <u>PRINZ</u>	FIRST GIVEN NAME <u>CHI</u>	SECOND GIVEN NAME	
RESIDENCE & CITIZENSHIP CITY <u>North Melbourne</u>	STATE OR OTHER COUNTRY <u>AUSTRALIA</u>	VICTORIA, AUSTRALIA	COUNTRY OF CITIZENSHIP <u>New Zealand</u>	
POST OFFICE ADDRESS <u>46 Erskin Street</u>	POST OFFICE ADDRESS <u>46 Erskin Street</u>	POST OFFICE ADDRESS <u>North Melbourne, Victoria</u>	STATE & ZIP CODE/COUNTRY <u>3051, Australia</u>	

46 Erskine Street Victoria
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

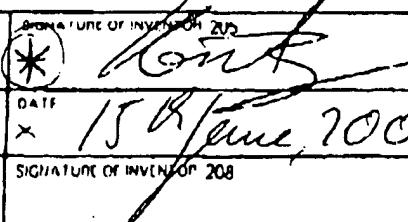
NAME OF INVENTOR	SIGNATURE OF INVENTOR	SIGNATURE OF INVENTOR
 Suzanne Cory	 <i>Jerry M. Miller</i>	
DATE	DATE	DATE
 14 June 2000	 <i>14 June, 2000</i>	

Signature for fourth and subsequent joint inventors.
Number of pages added ____.

61 3 9345 2616

204	FULL NAME OF INVENTOR	FAMILY NAME <u>GIBSON</u>	FIRST GIVEN NAME <u>Leonie</u>	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	Moonee Ponds	STATE OR FOREIGN COUNTRY <u>Victoria, Australia</u>	COUNTRY OF CITIZENSHIP <u>Australia</u>
205	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>13 Park Street,</u>	CITY <u>Moonee Ponds, Victoria</u>	STATE & ZIP CODE/COUNTRY <u>3039, Australia</u>
	FULL NAME OF INVENTOR	FAMILY NAME <u>KOENTGEN</u>	FIRST GIVEN NAME <u>Frank</u>	SECOND GIVEN NAME
206	RESIDENCE & CITIZENSHIP	PARK Orchards	STATE OR FOREIGN COUNTRY <u>Victoria, Australia</u>	COUNTRY OF CITIZENSHIP <u>Germany</u>
	POST OFFICE ADDRESS	POST OFFICE ADDRESS <u>5 Timberglades,</u>	CITY <u>Park Orchards, Victoria</u>	STATE & ZIP CODE/COUNTRY <u>3114, Australia</u>
207	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
208	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY
	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME
209	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY

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SIGNATURE OF INVENTOR 204 	SIGNATURE OF INVENTOR 205 	SIGNATURE OF INVENTOR 206
DATE X 14th June, 2000	DATE X 15th June, 2000	DATE
SIGNATURE OF INVENTOR 207	SIGNATURE OF INVENTOR 208	SIGNATURE OF INVENTOR 209
DATE	DATE	DATE